Image# 28931004224 047/03||#20078 10:21

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

(a) Name of Individual, Organization or Corporation		
NARAL Pro-Choice America		
1.0.1.0.1.0.00		
(b) Address (number and street)		
Suite 700 (c) City, State and ZIP Code		
	3. FEC Identification Number	
Washington DC 20005	C C90004185	
2. Corporate filers only Is the filer a qualified nonprofit corporation? X Yes No	300001100	
is the lifer a qualified horiprofit corporation?		
Individual filers only Name of Employer	Occupation	
A TYPE OF REPORT (L.		
4. TYPE OF REPORT (check appropriate boxes):		
(a) April 15 Quarterly Report	ur Notice	
☐ July 15 Quarterly Report		
October Quarterly Report		
☐ January 31 Year-End Report		
□ January 31 Tear-End Neport		
(b) Is this Report an amendment? Yes \(\subseteq \text{No } \(\text{X} \)		
5. COVERING PERIOD: FROM 04 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
THROUGH		
M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
6. TOTAL CONTRIBUTIONS	0.00	
	0570.01	
7. TOTAL INDEPENDENT EXPENDITURES	9578.31	
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.		
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE	
John Botts	04/04/0000	
	04/01/2008	
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C 437g.		

 $For \ further \ information, \ contact:$

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E

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ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) NARAL Pro-Choice America Full Name (Last, First, Middle Initial) of Payee Date Convio м м 0 4 2008 Mailing Address Amount 11400 Burnet Rd. Bldg 5, Ste 200 812.43 State Zip Code TX 78757 Austin Purpose of Expenditure Office Sought: House State: DC Category/ Email Services (4/1 Email Type Presidential Senate District: 00 Χ President Name of Federal Candidate Supported or Opposed by Expenditure: John McCain Check One: Support X Oppose X Primary Disbursement For: General Calendar Year-To-Date Per Election 2008 62897.20 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date NARAL Pro-Choice America М М 2008 Mailing Address Amount 1156 15th Street, NW, Suite 700 8040.88 Zip Code City State Washington DC 20005 Purpose of Expenditure Office Sought: House State: DC Category/ List Rental (4-1 Email) Type Presidential Senate District: 00 Х President Name of Federal Candidate Supported or Opposed by Expenditure: John McCain Check One: Support X Oppose Disbursement For: X Primary General Calendar Year-To-Date Per Election 2008 62897.20 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date M+R Strategic Services ^мо 4 2008 Mailing Address Amount 2120 L Street, NW 6th Floor 725.00 Zip Code State City 20037 DC Washington Purpose of Expenditure Office Sought: State: DC Category/ House Message Dev. (4/1 Email) Type Presidential Senate District: 00 Χ President Name of Federal Candidate Supported or Opposed by Expenditure: John McCain Check One: Support X Oppose Disbursement For: X Primary General Calendar Year-To-Date Per Election 2008 62897.20 for Office Sought Other (specify) 9578.31 (a) SUBTOTAL of Itemized Independent Expenditures ... (b) SUBTOTALof Unitemized Independent Expenditures..... 9578.31 (c) TOTAL Independent Expenditures

(carry total from last page forward to Line 7)